



## Local Developing Business Eligibility Form

**Office of Business Opportunity**  
**6501 Magic Way, Building 101F**  
**Orlando, Florida 32809**  
**407-317-3739 (phone)**  
**407-317-3784 (fax)**

1. Firm Name _____	2A. Street Address of Principal Office _____	2B. OCPS Vendor # (iif applicable) _____
		2C. OCPS Bid/RFQ # (if applicable) _____

2D.. County of Principal Office: <input type="checkbox"/> Orange <input type="checkbox"/> Osceola <input type="checkbox"/> Lake <input type="checkbox"/> Seminole	3. *M/WBE Certified <input type="checkbox"/> Yes <input type="checkbox"/> No
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\*OCPS accepts MWBE certification from the State of Florida, Orange County, City of Orlando, and Florida Minority Suppliers' Development Council (FMSDC).

4. Contact Name _____	5. Phone Number _____	6. Fax Number _____	7. Web Address _____	8. Email Address _____
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**9. Ownership of Firm: Identify the Owners of the Firm: Please attach Articles of Incorporation, Articles of Organization or Partnership Agreement of Firm and other entities owned.** If any of the owners is a corporation, partnership, or other entity other than an individual (an "Entity"), please provide the same information with respect to each of the owners of the Entity (attach separate sheet if necessary).

Name	Address (street, city, state, zip)	Years of Ownership	Ownership %	Voting %

**10. Control of Firm: Identify, by name and title, those individuals (including owners and non-owners) who are responsible for day-to-day management and policy/decision making including, but not limited, to the areas below. In addition, please attach the resume of each person listed.**

Area of Control	Name	Title	Years with Firm:
Financial Decisions			
<b>Management Decisions:</b>			
1. Estimating			
2. Marketing and Sales			
3. Personnel			
4. Other			

"Revenue Limitations" means that a firm's average gross revenue/profit, averaged over the last three (3) years may not exceed:

1. Construction Management - \$7,500,000 in annual gross **revenues**
2. Professional Services (Architectural and Engineering Services) - \$2,000,000 in annual gross **revenues**
3. Procurement of goods and non-professional services - \$1,000,000 annual gross **profit**

**11. Please state the Gross Revenues (Construction and Professional Services) or Gross Profit (Goods and Non-Professional Services) received by your firm for each of the following years. In addition, please attach a statement certified by a CPA of company's Gross Revenue or Profit.**

Year Ending _____	Gross Revenues <input type="checkbox"/> or Profit <input type="checkbox"/> (check one)	
Year Ending _____	Gross Revenues <input type="checkbox"/> or Profit <input type="checkbox"/> (check one)	
Year Ending _____	Gross Revenues <input type="checkbox"/> or Profit <input type="checkbox"/> (check one)	



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12. "Net Worth" means the net worth of each individual owner **does not exceed \$750,000** exclusive of the equity in each individual's primary residence (up to \$500,000) and exclusive of the equity in any business in which the individual is actively involved in the management and day to day operation of said business.

**Please attach the following documents which will be used to establish each individual's net worth:**

1. Each individual owner's balance sheet with a sworn statement as to accuracy and authorization for release of information to School Board.
2. Property titles

Please note that additional documentation may also be requested.

13. Stock Options: Describe or attach a copy of any stock options or other ownership options that are outstanding, and any agreements between owners or between owners and third parties which restrict ownership or control of the owners. (Attach a separate sheet if necessary).

14. Nature of Business: Specify major services / products provided and the corresponding commodity code (see NIGP codes found at: [Gainesville - NIGP Codes](#)).

Description of Commodity/Service	NIGP Commodity Code

15. Are you authorized to do business in the state as well as locally, including all necessary business licenses? ☐ YES ☐ NO

### 16. AFFIDAVIT

*"The undersigned swears that the foregoing statements are true and correct and include all material information necessary to identify and explain the operations of (name of firm) as well as the ownership thereof. Further, the undersigned agrees to provide directly to the Orange County School Board, current, complete, and accurate information regarding actual work performed on the project, the payment thereof, and any proposed changes, if any, of the foregoing arrangements and to permit the audit and examination of books, records and files of the named firm. Any material misrepresentation will be grounds for terminating any contract which may be awarded and for initiating action under Federal and State laws concerning false statements."*

NOTE: If, after filing this form and before the work of this firm is completed on the contract covered by this regulation, there is any significant change in the information submitted, you must inform the Orange County School Board of the change.

Name (printed/typed):	Signature:	Title:	Date:
Corporate Seal (where appropriate):			Date:
State of			
County of			
Sworn to (or affirmed) and subscribed before me by means of _____ physical presence or _____ online notarization, this _____ day of _____, 20____, by _____, who (select one) _____ is Personally Known or _____ Produced _____ as Identification.			
Notary Public:		Commission Expires:	



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Item #	Instructions
1.	Enter the firm's name. If business is a sole proprietorship, please list the owner's name and the "doing business as" name. For example: John Doe dba JD's Lumber.
2A.	Enter the physical address of the firm's principal office.
2B.	Enter OCPS Vendor Number, if known
2C.	Enter OCPS bid, quote, or Request for Qualification (RFQ) number, if known.
2D	Indicate the county in which the firm's principal office is located. Firms seeking certification with OCPS should have principal offices located within the Orlando Statistical Metropolitan Area (OSMA) – Orange, Osceola, Seminole or Lake County.
3.	Indicate whether firm is certified as a minority- or woman-owned business enterprise by City of Orlando, Orange County, State of Florida, or the Florida Minority Suppliers' Development Council.
4.	Enter the name of the firm's primary contact.
5.	Enter firm's primary phone number.
6.	Enter facsimile (fax) number.
7.	Enter the firm's Internet address.
8.	Enter the primary email address for the firm's contact.
9.	Identify the name, address (including street, city, state, and zip) of the owners of the firm, years of ownership, ownership percentage, and voting percentage.
10.	List the name, title, years with firm for decision makers: Finance, estimating, marketing/sales, personnel, and other (please specify). <b>Attach the resume of each person listed.</b>
11.	For the years indicated, list firm's gross revenue (construction and professional services) or firm's gross profit (goods and services).
12.	<b>Attach a copy of each owner's personal balance sheet and copy of property titles.</b>
13.	If there are stock options, please either describe or attach a copy of any agreements regarding stock options.
14.	List firm's primary commodities and/or services along with the appropriate NIGP code. NIGP codes are available at <a href="#">Gainesville - NIGP Codes</a> .
15.	Verify that firm is authorized to work in the State of Florida and locally with appropriate business license(s).
16.	Please sign, date, and have notarized the affidavit verifying that all information is accurate and that any changes will be communicated to Orange County Public Schools Office of Business Opportunity.